

(1) OWNER: Name City of Louisville Address 45 Seventh Street PO Box 9839
 (2) LOCATION OF WELL: County Island Hampton tract Lot 5 of 1/4 Sec. 14 T. 31 N. R E W.M.
 Bearing and distance from section or subdivision corner See sketch

(3) PROPOSED USE: Domestic ☐ Industrial ☐ Municipal ☒
Irrigation ☐ Test Well ☐ Other ☐

(4) TYPE OF WORK: Owner's number of well # 4
(if more than one).....

New well	<input checked="" type="checkbox"/>	Method: Dug	<input type="checkbox"/>	Bored	<input type="checkbox"/>
Deepened	<input type="checkbox"/>	Cable	<input checked="" type="checkbox"/>	Driven	<input type="checkbox"/>
Reconditioned	<input type="checkbox"/>	Rotary	<input type="checkbox"/>	Jetted	<input type="checkbox"/>

(5) **DIMENSIONS:** Diameter of well 12 inches.
 Drilled 93 ft. Depth of completed well 92.5 ft.

(6) CONSTRUCTION DETAILS:

Casing installed: 6" Diam. from 0 ft. to 77.5 ft.
 Threaded ☐ 6" Diam. from 87.5 ft. to 93.5 ft.
 Welded ☒ 6" Diam. from _____ ft. to _____ ft.

Perforations: Yes ☐ No ☒

Type of perforator used.....

SIZE of perforations in. by in.

..... perforations from ft. to ft.

..... perforations from ft. to ft.

..... perforations from ft. to ft.

Screens: Yes ☒ No ☐

Manufacturer's Name Cook

Type 304 stainless **Model No.** _____

Diam. 6 **Slot size** 10 **from** 77.5 **ft. to** 82.5 **ft.**

Diam. _____ **Slot size** _____ **from** _____ **ft. to** _____ **ft.**

Gravel packed: Yes ☒ No ☐ Size of gravel: 4 in #8
Gravel placed from 93 ft. to 56 ft.

Surface seal: Yes ☒ No ☐ To what depth? 56 ft.
Material used in seal cement grout
Did any strata contain unusable water? Yes ☐ No ☒
Type of water? _____ Depth of strata _____
Method of sealing strata off _____

(7) PUMP: Manufacturer's Name.....
Type: H.P.

(8) **WATER LEVELS:** Land-surface elevation above mean sea level.....ft.
 Static level 26.....ft. below top of well Date.....
 Artesian pressure.....lbs. per square inch Date.....
 Artesian water is controlled by.....
 (Cap, valve, etc.)

(9) WELL TESTS: Drawdown is amount water level is lowered below static level. *D. Miller*

Was a pump test made? Yes ☒ No ☐ If yes, by whom? *D. Miller*

Yield: *42* gal./min. with *40* ft. drawdown after *8* hrs.

11	10	10	10
11	10	10	10

Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)

<i>Time</i>	<i>Water Level</i>	<i>Time</i>	<i>Water Level</i>	<i>Time</i>	<i>Water Level</i>

Date of test _____
 Bailor test _____ gal/min, with _____ ft. drawdown after _____ hrs.
 Artesian flow _____ g.p.m. Date _____
 Temperature of water _____ Was a chemical analysis made? Yes ☐ No ☐

(10) WELL LOG:

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

[illegible]**WELL DRILLER'S STATEMENT:**

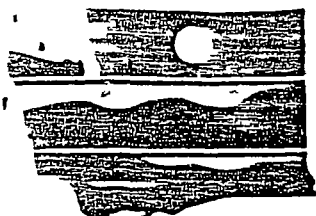
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME Holt & Drilling Inc
(Person, firm, or corporation) (Type or print)

Address: 12515 32nd Street East

[Signed] Barry Holt
(Well Driller)

License No. 1099 Date 4-10, 1987



WASHINGTON STATE
DEPARTMENT OF
ECOLOGY

Well Tagging Form

Unique Well Tag No: AGA 671 ⁰¹

RECORD VERIFICATION (check one)

- ☐ Well Report available (please attach this form to the well report and submit it to the Ecology Regional Office near you)
- ☐ Verification inconclusive WELL 4-87
- ☐ Well Report not available

WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT

First Name COUPEVILLE, TOWN OF Last Name _____

Street Address _____

City _____ State _____

LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT

Well Address 439 WANNAMAKER

City _____ County _____

T _____ N R _____ W M Sec _____ 1/4 of the _____

FOR AGENCY USE ONLY

Latitude _____

Longitude _____

Elevation at land surface _____ feet/meters (circle one)

Additional information, if available

- ☐ GPS
- ☐ Topographic Map
- ☐ Survey
- ☐ Computer generated
- ☐ Digital Altimeter
- ☐ Topographic Map
- ☐ Other _____

☐ Location marked on topographic map (please attach)

☐ Location marked on air photo (please attach)

The Department of Ecology does NOT Warranty the Data and/or the Information on this Well Report.

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WELL CHARACTERISTICS

Scale Description of well (size of casing, type of well, housing, etc.)

SQUARE,
CONCRETE HOUSING (3' x 3.5' x 5') WITH METAL LID THAT IS

PARTIALLY SUBMERGED. NUMBER OF WELL IS PAINTED ON HEAD.

FIRST WELL HEAD IN STRING

Location or Well Identification Tag

Supplemental tag needed for ease of identifying well?

☐

Yes

☒

No

Where was tag placed?

Scale 1 24,000 (1"=2,000')

Indicate the location of the well within the Section by drawing a dot at that point.

SECTION _____

C	B	A
F	G	H
L	K	J
P	Q	R

Comments

FOR DEPARTMENT OF ECOLOGY WATER RESOURCES PROGRAM ONLY

Project #

Date Issued

One

Application

Permit

Certificate

Claim

Exempt